File Original and First Copy with Department of Ecology

## ATER WELL REPORT

Start Card No

Second Copy-Owner's Copy STATE OF WASHINGTON Third Copy-Driller's Copy Water Right Permit No. Address 74465 MAXWelson Rd WASIOSKI (1) OWNER: Name\_ T. 28 N. R 3E WM K SLN K Soc 4 ISLAND (2) LOCATION OF WELL: County\_\_\_ Burley (2a) STREET ADDDRESS OF WELL (or nearest address). (10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION PROPOSED USE: Domestic Municipal Industrial Formation: Describe by color, character, size of material and structure, and show Test Well Other П DeWater thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information. TYPE OF WORK: Owner's number of well (if more than one) Method: Dug Dug Cable Bored | New well 30 Abandoned  $\Box$ SANDY CLAY Δ Driven Deepened 30 91 Jetted 🗆 SAND Reconditioned Rotary 🗍 91 SAND WITH CIA (5) DIMENSIONS: Diameter of wellinches. WATER SAND Drilled \_\_\_\_\_feet. Depth of completed well\_ DIRTY SANDY CLAY WATER SAN 155 CONSTRUCTION DETAILS: \_ \* Diam. from\_ Casing Installed: \_ \* Diam. from. Diam. from. Perforations: Yes Type of perforator used \_ in by SIZE of perforations ... \_ perforations from \_ \_\_ perforations from \_ nerforations from .... Screens: Yes DEPT: OF ECOLOGY Manufacturer's Name\_ TYPO STAINLESS Model No \_ Slot size\_ [ O 11. 10 Lal Slot size . Gravel packed: Yes No Size of gravel \_ Gravel placed from. No To what depth?\_ Surface seal: Yes BENTONITE Material used in seal \_\_\_\_\_ ISLAND COUNTY WELL Did any strata contain unusable water? Yes APPRONED Type of water?... Method of sealing strate off... (7) PUMP: Manufacturer's Name HP Land-surface elevation 15a-WATER LEVELS: above mean sea level ... \_\_\_\_ ft. below top of well. Date Sept 91 Static level 121 \_\_\_ lbs. per square inch Date \_ Artesian pressure ... Artesian water is controlled by \_\_\_\_ 19. Completed .: Work started. WELL TESTS: Drawdown is amount water level is lowered below static level Was a pump test made? Yes No. No. If yes, by whom? \_ WELL CONSTRUCTOR CERTIFICATION: I constructed and/or accept responsibility for construction of this well, \_\_ gal./min. with \_\_ \_\_\_\_\_ ft. drawdown after \_ Yield: \_\_ and its compliance with all Washington well construction standards.
Materials used and the information reported above are true to my best knowledge and belief. Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level) NAME WHIDBEY WELL (PERSON, FIRM, OR CORPORATION) DRILLERJ (TYPE OR PRINT) Water Level Water Lavel Time 98277 WASH Address OAK HARBOR Bailer test 20+ gel./min. with 20- ft. drawdown after 4+ hre. Contractor's Airtest \_\_\_\_\_ gal./min. with stem set at Registration No. WHIP 289 MM Date ScpT \_ g.p.m. Date . Artesian flow \_ \_\_ Was a chemical enalysis made? Yes 🔲 🛮 No 🗹

(USE ADDITIONAL SHEETS IF NECESSARY)

